Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 961,15 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) NUMBER EXTRA RATE FEE RATE NUMBER FILED FOR BASIC FEE **3333** OR (37 CFR 1.16(a)) TOTAL CLAIMS OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS x s 40 = OR minus 3 = (37 CFR 1.16(b)) 270<u>.</u> OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) TOTAL OR TOTAL \* If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR 1/14/03 (Column 3) SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) HIGHEST CLAIMS ADDI-PRESENT RATE ADDI-RATE NUMBER REMAINING TIONAL TIONAL **EXTRA PREVIOUSLY** ENDMENT **AFTER** FEE FEE AMENDMENT PAID FOR Minus Total (37 CFR 1.36(c)) Independent (37 CFR \* 16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + s 140 = OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS RATE ADDI-PRESENT RATE ADDI- $\alpha$ NUMBER REMAINING TIONAL TIONAL **EXTRA** PREVIOUSLY AFTER ENDMENT FEE PAID FOR FEE AMENDMENT Total (37 CFR 1.16(c)) Minus OR Minus Independent (37 CFR 1.16(b)) OR

	1/26/04	(Column 1)		(Column 2)	(Column 3)					
AMENDMENT C	C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA					
	Total (37 CFR 1 16(6))	20	Minus	" 21	2					
	Independent (37 CFR 1.16(b))	. 4	Minus	4	-					
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

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RATE	TIO	DI- NAL EE	
x s9_ =	1		0
x s <b>83</b> =			o
+ 5/45 =			0
TOTAL ADD'L FEE		1	o

TOTAL

ADD'L FEE

OR

OR

TOTA

ADD'L FEE

	RATE	ADDI- TIONAL FEE				
R	× s_/8 =					
R	× s <b>26</b> =					
R	+ s <b>290</b> =					
R	TOTAL ADD'L FEE					

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, use 10 to process) an application. Confidentiality is governed by 35 0.3.0. 122 and 37 GFK 1.14. This confection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

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CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN														
			(Column 1)		(Col	(Column 2)		TYPE			OR		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS						RATE		FE	FEE		RATE	<del>,                                     </del>	EE	
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FI	385	.00	OR	BASIC FEE	<del>                                     </del>	0.00
Ţ	OTAL CHARGE	ABLE CLAIMS	· m	nus 20=	•			XS 9=		•	OR	XS18=		•
IN	DEPENDENT (	CLAIMS	· m	minus 3 =				X43=	1			X86=		
М	ULTIPLE DEPE	NDENT CLAIM	PRESENT						+-	·	OR		<del> </del>	
• 1	• If the difference in column 1 is less than zero, enter "0" in column 2							+145=			OR	-290=	<u> </u>	
		CLAIMS AS (Column 1)						TOTAL	<u> </u>		OR	TOTAL		
	716/04			100.011		(Column 3)	_	SMALL	. ENTIT	Υ	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADD TION FEI	AL		RATE	TIO	DI- NAL
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AME	Independent	. 4	Minus	4	/	=	Ī	X43=		П	OR	X86=	1	
Щ		ENTATION OF M	OCTIPLE DE	PENDENI	CLAIM	الللل		+145=	1	П	OR	+290=	$\overline{}$	
								TOTAL	-	$\varTheta$	L	TOTAL		
		(Column 1)		(Colum	n 2)	(Column 3)	A	ODIT. FEE	<u> </u>			NDDIT. FEE		
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHE NUMBI PREVIOL PAID:F	ER USLY	PRESENT EXTRA		RATE	ADD TION/ FEE	AL		RATE	AD TIO	NAL
NON	Total	•	Minus	**	•	=		X\$ 9=	,	$\Box_{c}$	OR	X\$18=		
AME	Incependent	NTATION 05 14	Minus	***			F	X43=	<b></b>	٦,	OR	X86=	-	ヿ
	FINST FRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	JLAIM		T	+145=		7	DR	+290=		
							L	TOTAL ODIT. FEE		-1	) E.	TOTAL DDIT. FEE		$\dashv$
		(Column 1)		(Column	T 2)	(Column 3)		1011.1 CE		•	^	, ,		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R. ISLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE			RATE	ADI TION FE	IAL
	Total	•	Minus	**		=		X\$ 9=		$I_{o}$	R	X\$18=		
A A	Independent			=		X43=		1	R	X86=		7		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									7				$\dashv$
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Provinces Paid For INTAL COLUMN 3.										4				
and the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20.  ADDIT. FEE ADDIT. FEE														
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														